

<i>SERFF Tracking Number:</i>	<i>AFDL-126094838</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>American Fidelity Assurance Company</i>	<i>State Tracking Number:</i>	<i>42017</i>
<i>Company Tracking Number:</i>	<i>T95P08.R309 SCHEDULE PAGES</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.103 Renewable - Single Life - Fixed/Indeterminate Premium</i>
<i>Product Name:</i>	<i>T95P08.R309 Schedule Pages</i>		
<i>Project Name/Number:</i>	<i>T95P08.R309 Schedule Pages/T95P08.R309 Schedule Pages</i>		

Filing at a Glance

Company: American Fidelity Assurance Company

Product Name: T95P08.R309 Schedule Pages SERFF Tr Num: AFDL-126094838 State: Arkansas

TOI: L04I Individual Life - Term SERFF Status: Closed-Approved- State Tr Num: 42017
Closed

Sub-TOI: L04I.103 Renewable - Single Life - Co Tr Num: T95P08.R309 State Status: Approved-Closed
Fixed/Indeterminate Premium SCHEDULE PAGES

Filing Type: Form Reviewer(s): Linda Bird
Disposition Date: 04/02/2009
Authors: Shari Vick, Melissa Mahanes, Ashlie Snyder
Date Submitted: 03/31/2009 Disposition Status: Approved-Closed

Implementation Date Requested: On Approval Implementation Date:
State Filing Description:

General Information

Project Name: T95P08.R309 Schedule Pages
Project Number: T95P08.R309 Schedule Pages
Requested Filing Mode: Informational

Explanation for Combination/Other:
Submission Type: New Submission
Overall Rate Impact:
Filing Status Changed: 04/02/2009

Deemer Date:
Submitted By: Melissa Mahanes

Filing Description:

Enclosed for submission is the above-mentioned form. This form will replace the T95P08 Schedule Pages included with our submission of the T95P08AR Term to Age 95 Life Insurance Policy previously approved for use by your department on 6-9-08 (Serff Tracking #AFDL-125663574). The enclosed form is identical to the T95P08 Schedule Pages except for the changes shown on the highlighted form included with this filing.

Status of Filing in Domicile: Pending
Date Approved in Domicile:
Domicile Status Comments: Filed in our state of domicile on 3-31-09
Market Type: Individual
Group Market Size:
Group Market Type:
Explanation for Other Group Market Type:
State Status Changed: 04/02/2009
Created By: Melissa Mahanes
Corresponding Filing Tracking Number:
T95P08.R309 Schedule Pages

<i>SERFF Tracking Number:</i>	<i>AFDL-126094838</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>American Fidelity Assurance Company</i>	<i>State Tracking Number:</i>	<i>42017</i>
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<i>Product Name:</i>	<i>T95P08.R309 Schedule Pages</i>		
<i>Project Name/Number:</i>	<i>T95P08.R309 Schedule Pages/T95P08.R309 Schedule Pages</i>		

The only revisions to this form are as follows:

1. We are revising our modal factors to be more consistent with our expenses. This change will not affect the Actuarial Memorandum previously filed with our original submission of the T95P08AR.
2. We are adding a modal factor for bi-weekly.
3. We are revising our statement of variability. Although these modal factors are unlikely to change, we are marking them variable. They may vary in accordance with changes in our expenses. A revised Statement of Variability is attached to this filing.

These changes will apply to new issues only for effective dates no earlier than June 1, 2009.

This form may eventually be issued from an automated system. We will make every attempt to produce the automated version to duplicate this final printed format; however, fonts and word wrap can vary when going from one system or printer to another. We will not alter the wording and will try to duplicate all pages, including keeping the verbiage on each page as submitted for approval. The pages may print on different colors of paper depending upon the market.

I hereby certify that to the best of my knowledge the forms submitted herewith are in compliance in all respects with the provisions of the insurance laws, rules and regulations of the state of your state and that such forms contain no provisions previously disapproved by the Department.

Thank you for your assistance with this matter. If you have any questions, please feel free to contact me at the telephone or fax numbers, or e-mail address listed above.

Company and Contact

Filing Contact Information

Melissa Mahanes, Compliance Analyst II	melissa.mahanes@af-group.com
2000 Classen Blvd	800-654-8489 [Phone] 2035 [Ext]
Oklahoma City, OK 73106	405-523-5793 [FAX]

Filing Company Information

American Fidelity Assurance Company	CoCode: 60410	State of Domicile: Oklahoma
2000 North Classen Blvd	Group Code:	Company Type: LAH
Oklahoma City, OK 73106	Group Name:	State ID Number:
(405) 523-2000 ext. [Phone]	FEIN Number: 73-0714500	

Filing Fees

SERFF Tracking Number:	AFDL-126094838	State:	Arkansas
Filing Company:	American Fidelity Assurance Company	State Tracking Number:	42017
Company Tracking Number:	T95P08.R309 SCHEDULE PAGES		
TOI:	L04I Individual Life - Term	Sub-TOI:	L04I.103 Renewable - Single Life - Fixed/Indeterminate Premium
Product Name:	T95P08.R309 Schedule Pages		
Project Name/Number:	T95P08.R309 Schedule Pages/T95P08.R309 Schedule Pages		

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
American Fidelity Assurance Company	\$0.00	03/31/2009	
American Fidelity Assurance Company	\$25.00	03/31/2009	26843824

SERFF Tracking Number:	AFDL-126094838	State:	Arkansas
Filing Company:	American Fidelity Assurance Company	State Tracking Number:	42017
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TOI:	L04I Individual Life - Term	Sub-TOI:	L04I.103 Renewable - Single Life - Fixed/Indeterminate Premium
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Linda Bird	04/02/2009	04/02/2009

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Retaliatory Fee	Note To Reviewer	Melissa Mahanes	03/31/2009	03/31/2009

<i>SERFF Tracking Number:</i>	<i>AFDL-126094838</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>American Fidelity Assurance Company</i>	<i>State Tracking Number:</i>	<i>42017</i>
<i>Company Tracking Number:</i>	<i>T95P08.R309 SCHEDULE PAGES</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.103 Renewable - Single Life - Fixed/Indeterminate Premium</i>
<i>Product Name:</i>	<i>T95P08.R309 Schedule Pages</i>		
<i>Project Name/Number:</i>	<i>T95P08.R309 Schedule Pages/T95P08.R309 Schedule Pages</i>		

Disposition

Disposition Date: 04/02/2009

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number:	AFDL-126094838	State:	Arkansas
Filing Company:	American Fidelity Assurance Company	State Tracking Number:	42017
Company Tracking Number:	T95P08.R309 SCHEDULE PAGES		
TOI:	L04I Individual Life - Term	Sub-TOI:	L04I.103 Renewable - Single Life - Fixed/Indeterminate Premium

Product Name:	T95P08.R309 Schedule Pages
Project Name/Number:	T95P08.R309 Schedule Pages/T95P08.R309 Schedule Pages

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	fee form		Yes
Supporting Document	Revised SoV		Yes
Supporting Document	changes highlighted		Yes
Form	T95P08 Schedule Pages		Yes

SERFF Tracking Number: *AFDL-126094838* *State:* *Arkansas*
Filing Company: *American Fidelity Assurance Company* *State Tracking Number:* *42017*
Company Tracking Number: *T95P08.R309 SCHEDULE PAGES*
TOI: *L04I Individual Life - Term* *Sub-TOI:* *L04I.103 Renewable - Single Life -*
Fixed/Indeterminate Premium

Product Name: *T95P08.R309 Schedule Pages*
Project Name/Number: *T95P08.R309 Schedule Pages/T95P08.R309 Schedule Pages*

Note To Reviewer

Created By:

Melissa Mahanes on 03/31/2009 02:13 PM

Last Edited By:

Linda Bird

Submitted On:

04/02/2009 09:39 AM

Subject:

Retaliatory Fee

Comments:

Oklahoma charges \$25 for informational filings. We are remitting the required retaliatory fee in accordance with your requirements.

Sincerely,

Melissa Mahanes

<i>SERFF Tracking Number:</i>	<i>AFDL-126094838</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>American Fidelity Assurance Company</i>	<i>State Tracking Number:</i>	<i>42017</i>
<i>Company Tracking Number:</i>	<i>T95P08.R309 SCHEDULE PAGES</i>		
<i>TOI:</i>	<i>L04I Individual Life - Term</i>	<i>Sub-TOI:</i>	<i>L04I.103 Renewable - Single Life - Fixed/Indeterminate Premium</i>
<i>Product Name:</i>	<i>T95P08.R309 Schedule Pages</i>		
<i>Project Name/Number:</i>	<i>T95P08.R309 Schedule Pages/T95P08.R309 Schedule Pages</i>		

Form Schedule

Lead Form Number: T95P08.R309 Schedule Pages

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	T95P08.R309	Schedule Pages	T95P08 Schedule Pages	Initial		0.000	T95P08.R309 generic Schedule Pages Real #s.pdf

POLICY SCHEDULE

POLICY INFORMATION

Insured: [JOHN DOE]

Age and Sex: [35 MALE]

Policy No: [T95P08SAMPLE]

Effective Date: [JUN 1, 2008]

Benefit Amount: [\$100,000]

Premium Class: [STANDARD NON-TOBACCO]

Reinstatement Interest Rate: 6% per year.

Minimum Income Option Interest Rate: 3% compounded annually

SCHEDULE OF BENEFITS AND PREMIUMS*

<u>Benefit Name</u>	<u>Benefit Amount</u>	<u>Benefit Effective Date</u>	<u>[Annual] Premium</u>	<u>Benefit Expiry Date</u>
Term Life	[\$100,000	JUN 1, 2008	\$473.00	June 1, 2069]

TOTAL PREMIUMS BY FREQUENCY*

<u>Annual</u>	<u>Semi-Annual</u>	<u>Quarterly</u>	<u>Monthly Bank Draft</u>	<u>Bi-Weekly</u>
[\$473.00	\$264.88	\$134.81	\$45.41	\$20.96]

Premium Frequency Elected: [ANNUAL]

If premiums are to be paid on a basis other than annually, the premium will be the annual premium times a factor. The modal factors are [0.56, 0.285, 0.096 and 0.04431 (semi-annually, quarterly, monthly bank draft, and bi-weekly, respectively.)]

* Death Benefit Amounts and Guaranteed Annual Premiums for all policy years for the Term Life policy are shown on the Schedule of Decreasing Term Insurance.

SCHEDULE OF DECREASING TERM INSURANCE

	<u>Beginning Of Policy Year</u>	<u>Attained Age Of Insured</u>	<u>Death Benefit Amount</u>	<u>Guaranteed Annual Premium*</u>
[1	35	\$100,000	\$470.00
	2	36	\$100,000	\$470.00
	3	37	\$100,000	\$470.00
	4	38	\$99,800	\$470.00
	5	39	\$99,700	\$470.00
	6	40	\$99,600	\$470.00
	7	41	\$99,500	\$470.00
	8	42	\$99,400	\$470.00
	9	43	\$99,300	\$470.00
	10	44	\$99,200	\$470.00
	11	45	\$99,100	\$470.00
	12	46	\$98,200	\$470.00
	13	47	\$91,600	\$470.00
	14	48	\$87,100	\$470.00
	15	49	\$81,900	\$470.00
	16	50	\$76,000	\$470.00
	17	51	\$69,500	\$470.00
	18	52	\$63,000	\$470.00
	19	53	\$56,900	\$470.00
	20	54	\$50,600	\$470.00
	21	55	\$45,100	\$470.00
	22	56	\$40,500	\$470.00
	23	57	\$36,800	\$470.00
	24	58	\$33,800	\$470.00
	25	59	\$30,800	\$470.00
	26	60	\$27,900	\$470.00
	27	61	\$24,900	\$470.00
	28	62	\$22,200	\$470.00
	29	63	\$19,900	\$470.00
	30	64	\$17,900	\$470.00
	31	65	\$16,200	\$470.00
	32	66	\$14,800	\$470.00
	33	67	\$13,600	\$470.00
	34	68	\$12,500	\$470.00
	35	69	\$11,400	\$470.00
	36	70	\$10,400	\$470.00
	37	71	\$9,400	\$470.00
	38	72	\$8,500	\$470.00
	39	73	\$7,600	\$470.00
	40	74	\$6,900	\$470.00
	41	75	\$6,300	\$470.00
	42	76	\$5,700	\$470.00
	43	77	\$5,100	\$470.00
	44	78	\$4,600	\$470.00
	45	79	\$4,100	\$470.00
	46	80	\$3,700	\$470.00
	47	81	\$3,300	\$470.00
	48	82	\$3,000	\$470.00

SCHEDULE OF DECREASING TERM INSURANCE

<u>Beginning Of Policy Year</u>	<u>Attained Age Of Insured</u>	<u>Death Benefit Amount</u>	<u>Guaranteed Annual Premium*</u>
49	83	\$2,700	\$470.00
50	84	\$2,500	\$470.00
51	85	\$2,200	\$470.00
52	86	\$2,000	\$470.00
53	87	\$1,800	\$470.00
54	88	\$1,700	\$470.00
55	89	\$1,500	\$470.00
56	90	\$1,400	\$470.00
57	91	\$1,300	\$470.00
58	92	\$1,200	\$470.00
59	93	\$1,100	\$470.00
60	94	\$1,100	\$470.00
61	95	Policy Terminates]	

* The Guaranteed Annual Premium includes any charges for any additional benefit riders that may be attached to this policy, unless the premiums and or benefits for such rider charges are included in a separate schedule.

ONE-YEAR TERM INSURANCE PURCHASE RATES
Annual Rates per \$1,000 Face Amount

<u>Beginning Of Policy Year</u>	<u>Attained Age Of Insured</u>	<u>Annual Rate</u>
[4	38	\$ 1.1603569
5	39	\$ 1.1487533
6	40	\$ 1.1654175
7	41	\$ 1.1742444
8	42	\$ 1.2089384
9	43	\$ 1.3290975
10	44	\$ 1.4449976
11	45	\$ 1.5664926
12	46	\$ 1.7435869
13	47	\$ 1.9419688
14	48	\$ 2.1525797
15	49	\$ 2.3581334
16	50	\$ 2.5215707
17	51	\$ 2.7378838
18	52	\$ 2.9971930
19	53	\$ 3.3241769
20	54	\$ 3.7124385
21	55	\$ 4.1679517
22	56	\$ 4.6842647
23	57	\$ 5.2301880
24	58	\$ 5.8116847
25	59	\$ 6.3976638
26	60	\$ 6.8505515
27	61	\$ 7.4535475
28	62	\$ 8.0093451
29	63	\$ 8.5732409
30	64	\$ 9.2150321
31	65	\$ 9.8626867
32	66	\$ 10.5433495
33	67	\$ 11.1317406
34	68	\$ 12.0693289
35	69	\$ 13.2689678
36	70	\$ 14.6511051
37	71	\$ 16.2066638
38	72	\$ 17.8257560
39	73	\$ 19.3805152
40	74	\$ 21.3616509
41	75	\$ 23.5607264
42	76	\$ 25.5373604
43	77	\$ 27.9911435
44	78	\$ 30.8188579
45	79	\$ 33.5738678
46	80	\$ 37.8727180
47	81	\$ 41.9391294
48	82	\$ 46.8039591

ONE-YEAR TERM INSURANCE PURCHASE RATES
Annual Rates per \$1,000 Face Amount

<u>Beginning Of Policy Year</u>	<u>Attained Age Of Insured</u>	<u>Annual Rate</u>
49	83	\$ 51.7418209
50	84	\$ 57.5800774
51	85	\$ 63.7090555
52	86	\$ 68.0419467
53	87	\$ 73.2465364
54	88	\$ 77.8607561
55	89	\$ 82.5665563
56	90	\$ 88.3641577
57	91	\$ 93.6089663
58	92	\$100.1595425
59	93	\$106.1085788
60	94	\$113.6759044
61	95	Policy Terminates]

SERFF Tracking Number: AFDL-126094838 State: Arkansas
 Filing Company: American Fidelity Assurance Company State Tracking Number: 42017
 Company Tracking Number: T95P08.R309 SCHEDULE PAGES
 TOI: L04I Individual Life - Term Sub-TOI: L04I.103 Renewable - Single Life - Fixed/Indeterminate Premium
 Product Name: T95P08.R309 Schedule Pages
 Project Name/Number: T95P08.R309 Schedule Pages/T95P08.R309 Schedule Pages

Supporting Document Schedules

	Item Status:	Status Date:
Bypassed - Item: Flesch Certification		
Bypass Reason: not applicable		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: Application		
Bypass Reason: not applicable		
Comments:		

	Item Status:	Status Date:
Bypassed - Item: Life & Annuity - Acturial Memo		
Bypass Reason: No changes are being made to the Actuarial Memorandum included with our original submission.		
Comments:		

	Item Status:	Status Date:
Satisfied - Item: fee form		
Comments:		
Attachment: AR Filing Fee Form.pdf		

	Item Status:	Status Date:
Satisfied - Item: Revised SoV		
Comments: We added item #9 and revised items #8 & 12 to include "bi-weekly."		

SERFF Tracking Number: AFDL-126094838 State: Arkansas
Filing Company: American Fidelity Assurance Company State Tracking Number: 42017
Company Tracking Number: T95P08.R309 SCHEDULE PAGES
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Project Name/Number: T95P08.R309 Schedule Pages/T95P08.R309 Schedule Pages

Attachment:

STATEMENT OF VARIABILITY - T95P08rev.pdf

Item Status:

Status

Date:

Satisfied - Item: changes highlighted

Comments:

Attachment:

T95P08.R309 Schedule Pages changes highlighted.pdf

ARKANSAS INSURANCE DEPARTMENT

400 University Tower Building
1123 South University Ave.
Little Rock, Arkansas 72204

Lee Douglass
Insurance Commissioner

501-686-2900

ATTN: LIFE & HEALTH DIVISION, ARKANSAS INSURANCE DEPARTMENT

Company Name: American Fidelity Assurance Company

Company NAIC Code: 330-60410

Company Contact Person & Telephone # Melissa Mahanes, 800-654-8489 ext 2035

* INSURANCE DEPARTMENT USE ONLY

*

* ANALYST: _____ AMOUNT: _____ ROUTE SLIP: _____ *

ALL FEES ARE PER EACH INSURER, PER ANNUAL STATEMENT LINE OF BUSINESS,
UNLESS OTHERWISE INDICATED.

FEE SCHEDULE FOR ADMITTED INSURERS

RATE/FORM FILINGS

Life and/or Disability policy form filing
and review, per each policy, contract, annuity
form, per each insurer, per each filing.
Life and/or Disability - Filing and review
of
each rate filing or loss ratio guarantee filing,
per each insurer.

* _____ x\$ 50= _____

**Retaliatory _____

* _____ x\$ 50= _____

Life and/or Disability Policy, Contract or
Annuity Forms: Filing and review of each
certificate, rider, endorsement or application
if each is filed separately from the basic form.

_____ 1 x\$ 20= \$20 _____

Life and/or Disability: Filing and review of
Insurer's advertisements, per advertisement, per
each insurer.

_____ x\$ 25= _____

**Retaliatory \$25.00 _____

AMEND CERTIFICATE OF AUTHORITY

Review and processing of information to amend an
Insurer's Certificate of Authority.

_____ x\$400= _____

* _____

Filing to amend Certificate of Authority.

* _____ x\$100= _____

STATEMENT OF VARIABILITY

The T95P08 Term To Age 95 Life Insurance Policy and T95P08.R309 Schedule Pages contain variable information. All forms are completed in John Doe format and variable information is enclosed in brackets []. All variable items will become fixed at time of policy approval. Any changes made to these items will be limited to new issues.

T95P08 Policy Form

1. The address and phone number on the face page of the policy may vary depending upon the strategic business unit issuing the policy. This will ensure that our customers may easily contact the appropriate strategic business unit at all times. The possible addresses and phone numbers that may be inserted into these fields are listed below:

- For the Life Division:
 - Toll Free Telephone Number [1-800-735-9701]
 - Mailing Address [P.O. Box 268923] Oklahoma City, Oklahoma [73126-8923]
 - Local Telephone Number [405-524-8444]
- For AWD:
 - Toll Free Telephone Number [1-888-828-4967]
 - Mailing Address [2000 N Classen Blvd] Oklahoma City, Oklahoma [73106]
 - Local Telephone Number [405-523-2000]
- For AFES:
 - Toll Free Telephone Number [1-800-323-3748]
 - Mailing Address [2000 N Classen Blvd] Oklahoma City, Oklahoma [73106]
 - Local Telephone Number [405-523-2000]

Policy Schedule

1. The Insured's Name is the name of the Insured as it appears on the application for insurance. The format will be first name followed by last name.
2. The Age and Sex is the insured's age and sex at time of policy issue.
3. The Policy Number is the unique identifier our company assigns to the policy at time of policy issue.
4. The Effective Date is the date the policy goes into effect. This is the date the first premium is due; and is the date from which policy years, premium due dates, and policy anniversaries will be determined. Possible formats include: 1/1/08; 01/01/2008; January 1, 2008; or Jan 1, 2008.
5. The Benefit Amount is selected by the insured at time of application.
6. The Premium Class is provided by the Insured on the application. Possible variables include Preferred Non-Tobacco, Standard Non-Tobacco and Standard Tobacco.
7. The Benefit Effective Date is the date the Benefit goes into effect.
8. The Premium Frequency is elected by the Insured on the application for insurance. Possible variables include: annual, semi-annual, quarterly, monthly, and bi-weekly.
9. Although not likely to vary, the Modal Factors may vary in accordance with changes in our expenses or actuarial experience.

10. The Benefit Expiry Date is the date each benefit expires based upon the insured's age at time of issue and the benefit chosen.
11. The Total Premiums By Frequency elected will show the breakdown of the premium for each of the Frequencies available. These numbers will vary depending on the Insured's Issue Age/Sex and the face amounts and benefits elected by the Insured.
12. The Premium Frequency Elected is variable depending on the option elected by the Owner. The appropriate variables are annual, semi-annual, quarterly, monthly, or bi-weekly.
13. The values appearing in the Schedule of Decreasing Term Insurance will vary depending on issue age, sex and benefit amount elected by the Insured.
14. The One Year Term Insurance Schedule shows the Annual Rates to purchase One-Year Term Insurance. Values are shown on a per \$1,000 of insurance basis.

	3-30-09
Melissa Mahanes	Date
Compliance Analyst II	

POLICY SCHEDULE

POLICY INFORMATION

Insured: [JOHN DOE]

Age and Sex: [35 MALE]

Policy No: [T95P08SAMPLE]

Effective Date: [JUN 1, 2008]

Benefit Amount: [\$100,000]

Premium Class: [STANDARD NON-TOBACCO]

Reinstatement Interest Rate: 6% per year.

Minimum Income Option Interest Rate: 3% compounded annually

SCHEDULE OF BENEFITS AND PREMIUMS*

<u>Benefit Name</u>	<u>Benefit Amount</u>	<u>Benefit Effective Date</u>	<u>[Annual] Premium</u>	<u>Benefit Expiry Date</u>
Term Life	[\$100,000	JUN 1, 2008	\$473.00	Mo, Day, Year]

TOTAL PREMIUMS BY FREQUENCY*

<u>Annual</u>	<u>Semi-Annual</u>	<u>Quarterly</u>	<u>Monthly Bank Draft</u>	<u>Bi-Weekly</u>
[\$473.00	\$264.88	\$134.81	\$45.41	\$20.96]

Premium Frequency Elected: [ANNUAL]

If premiums are to be paid on a basis other than annually, the premium will be the annual premium times a factor. The modal factors are [0.56, 0.285, 0.096 and 0.04431 (semi-annually, quarterly, monthly bank draft, and bi-weekly, respectively.)]

* Death Benefit Amounts and Guaranteed Annual Premiums for all policy years for the Term Life policy are shown on the Schedule of Decreasing Term Insurance.

SCHEDULE OF DECREASING TERM INSURANCE

	<u>Beginning Of Policy Year</u>	<u>Attained Age Of Insured</u>	<u>Death Benefit Amount</u>	<u>Guaranteed Annual Premium*</u>
[1	35	\$100,000	\$470.00
	2	36	\$100,000	\$470.00
	3	37	\$100,000	\$470.00
	4	38	\$99,800	\$470.00
	5	39	\$99,700	\$470.00
	6	40	\$99,600	\$470.00
	7	41	\$99,500	\$470.00
	8	42	\$99,400	\$470.00
	9	43	\$99,300	\$470.00
	10	44	\$99,200	\$470.00
	11	45	\$99,100	\$470.00
	12	46	\$98,200	\$470.00
	13	47	\$91,600	\$470.00
	14	48	\$87,100	\$470.00
	15	49	\$81,900	\$470.00
	16	50	\$76,000	\$470.00
	17	51	\$69,500	\$470.00
	18	52	\$63,000	\$470.00
	19	53	\$56,900	\$470.00
	20	54	\$50,600	\$470.00
	21	55	\$45,100	\$470.00
	22	56	\$40,500	\$470.00
	23	57	\$36,800	\$470.00
	24	58	\$33,800	\$470.00
	25	59	\$30,800	\$470.00
	26	60	\$27,900	\$470.00
	27	61	\$24,900	\$470.00
	28	62	\$22,200	\$470.00
	29	63	\$19,900	\$470.00
	30	64	\$17,900	\$470.00
	31	65	\$16,200	\$470.00
	32	66	\$14,800	\$470.00
	33	67	\$13,600	\$470.00
	34	68	\$12,500	\$470.00
	35	69	\$11,400	\$470.00
	36	70	\$10,400	\$470.00
	37	71	\$9,400	\$470.00
	38	72	\$8,500	\$470.00
	39	73	\$7,600	\$470.00
	40	74	\$6,900	\$470.00
	41	75	\$6,300	\$470.00
	42	76	\$5,700	\$470.00
	43	77	\$5,100	\$470.00
	44	78	\$4,600	\$470.00
	45	79	\$4,100	\$470.00
	46	80	\$3,700	\$470.00
	47	81	\$3,300	\$470.00
	48	82	\$3,000	\$470.00

SCHEDULE OF DECREASING TERM INSURANCE

<u>Beginning Of Policy Year</u>	<u>Attained Age Of Insured</u>	<u>Death Benefit Amount</u>	<u>Guaranteed Annual Premium*</u>
49	83	\$2,700	\$470.00
50	84	\$2,500	\$470.00
51	85	\$2,200	\$470.00
52	86	\$2,000	\$470.00
53	87	\$1,800	\$470.00
54	88	\$1,700	\$470.00
55	89	\$1,500	\$470.00
56	90	\$1,400	\$470.00
57	91	\$1,300	\$470.00
58	92	\$1,200	\$470.00
59	93	\$1,100	\$470.00
60	94	\$1,100	\$470.00
61	95	Policy Terminates]	

* The Guaranteed Annual Premium includes any charges for any additional benefit riders that may be attached to this policy, unless the premiums and or benefits for such rider charges are included in a separate schedule.

ONE-YEAR TERM INSURANCE PURCHASE RATES
Annual Rates per \$1,000 Face Amount

<u>Beginning Of Policy Year</u>	<u>Attained Age Of Insured</u>	<u>Annual Rate</u>
[4	38	\$ 1.1603569
5	39	\$ 1.1487533
6	40	\$ 1.1654175
7	41	\$ 1.1742444
8	42	\$ 1.2089384
9	43	\$ 1.3290975
10	44	\$ 1.4449976
11	45	\$ 1.5664926
12	46	\$ 1.7435869
13	47	\$ 1.9419688
14	48	\$ 2.1525797
15	49	\$ 2.3581334
16	50	\$ 2.5215707
17	51	\$ 2.7378838
18	52	\$ 2.9971930
19	53	\$ 3.3241769
20	54	\$ 3.7124385
21	55	\$ 4.1679517
22	56	\$ 4.6842647
23	57	\$ 5.2301880
24	58	\$ 5.8116847
25	59	\$ 6.3976638
26	60	\$ 6.8505515
27	61	\$ 7.4535475
28	62	\$ 8.0093451
29	63	\$ 8.5732409
30	64	\$ 9.2150321
31	65	\$ 9.8626867
32	66	\$ 10.5433495
33	67	\$ 11.1317406
34	68	\$ 12.0693289
35	69	\$ 13.2689678
36	70	\$ 14.6511051
37	71	\$ 16.2066638
38	72	\$ 17.8257560
39	73	\$ 19.3805152
40	74	\$ 21.3616509
41	75	\$ 23.5607264
42	76	\$ 25.5373604
43	77	\$ 27.9911435
44	78	\$ 30.8188579
45	79	\$ 33.5738678
46	80	\$ 37.8727180
47	81	\$ 41.9391294
48	82	\$ 46.8039591

ONE-YEAR TERM INSURANCE PURCHASE RATES
Annual Rates per \$1,000 Face Amount

<u>Beginning Of Policy Year</u>	<u>Attained Age Of Insured</u>	<u>Annual Rate</u>
49	83	\$ 51.7418209
50	84	\$ 57.5800774
51	85	\$ 63.7090555
52	86	\$ 68.0419467
53	87	\$ 73.2465364
54	88	\$ 77.8607561
55	89	\$ 82.5665563
56	90	\$ 88.3641577
57	91	\$ 93.6089663
58	92	\$100.1595425
59	93	\$106.1085788
60	94	\$113.6759044
61	95	Policy Terminates]